



State of New Hampshire 2006 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2006

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 04/04/2006
Business ID: 309569
William M. Gardner
Secretary of State

TUCKER'S COVE BUILDERS, LLC

25 Maplewood Ave
Portsmouth, NH 03801

ADDRESS OF PRINCIPAL OFFICE:

25 Maplewood Ave
Portsmouth, NH 03801

REGISTERED AGENT AND OFFICE:

Shaines, Robert A
282 Corporate Drive
Portsmouth, NH 03801

ENTITY TYPE: LLC

BUSINESS ID: 309569

STATE OF DOMICILE: NEW HAMPSHIRE

FEDERAL ID: 020506467

CONSTRUCTION

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☒ The new mailing address Post Office Box 360, Portsmouth, NH 03802

☒ The new principal office address 282 Corporate Drive, Unit 1, Portsmouth, NH 03801

PO Box is acceptable.

MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

NAME Harbor Associates, LLC
Jeffrey Gouchberg, Manager
STREET 23 Central Avenue, Suite 710
CITY/STATE/ZIP Lynn, MA 01901

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

NAME

Harbor Associates, LLC
By: Jeffrey Gouchberg

/ Manager

TITLE

FEE DUE: \$100.00

State of New Hampshire
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WHEN THIS FO
PUBLIC DOCUM

REQUIRED INFORMATION MUST BE COMPLETED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529

IF WILL BECOME A
BLIC DISCLOSURE

RT WILL BE REJECTED